



ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

32 May 14, 2013

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

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Board of Supervisors**

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Deputy Director, Strategic Planning

May 14, 2013

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**ADOPTION OF FINDINGS AND RECOMMENDATIONS ON THE CLOSURE
OF
L. A. METROPOLITAN MEDICAL CENTER EMERGENCY DEPARTMENT
(SUPERVISORIAL DISTRICT 2)
(3 VOTES)**

SUBJECT

Request adoption of written findings made by the Emergency Medical Services Agency's Impact Evaluation Report of the closure of L.A. Metropolitan Medical Center Emergency Department.

IT IS RECOMMENDED THAT THE BOARD:

1. Approve the Impact Evaluation Report (IER), which concludes that the closure of L.A. Metropolitan Medical Center (LAD) Emergency Department (ED) on April 2, 2013, will have a negative impact upon the community.
2. Instruct the Director of Health Services (Director), or his designee, to forward the IER (Enclosure) to the California Department of Public Health (CDPH) within three days of adoption by the Board as required by California Health and Safety (H&S) Code Section 1300.

313 N. Figueroa Street, Suite 912
Los Angeles, CA 90012

Tel: (213)240-8101
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PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

On March 20, 2013, LAD notified the CDPH, Health Facilities Inspection Division and the Emergency Medical Services (EMS) Agency of the planned 90-day transition of the LAD ED to an urgent care center.

On, April 1, 2013, LAD notified the EMS Agency of the imminent closure of the ED on April 2, 2013. Administrators cited financial reasons as the basis of the closure. The EMS Agency subsequently informed Health Facilities Inspection Division and immediately instructed EMS provider agencies to begin diverting 9-1-1 traffic away from LAD ED. All base hospitals and 9-1-1 receiving hospitals affected by the closure were notified of the change.

The EMS Agency has prepared an IER outlining the impact of this closure on the EMS system in the County of Los Angeles.

Approval of the recommendations validates the EMS Agency's IER findings that the closure of LAD ED will have a negative effect upon the community; and instructs the Director to forward the IER to CDPH.

Implementation of Strategic Plan Goals

The recommended actions support Goal 3, Integrated Services Delivery, of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

There is no direct net County cost associated with the closure of LAD ED; however, County hospitals could be directly impacted if patients previously seen at LAD ED seek medical care at those facilities.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

California H&S Code Section 1255.1 requires hospitals to provide at least 90 days advance notice of any planned reduction or elimination of emergency medical services to the CDPH, the County, and healthcare service plans or other third party payers under contract with the hospital. Public notice must also be provided in a manner that is likely to reach a significant number of residents served by the hospital and it must be given at least 90 days in advance of the projected closure date.

However, a hospital is not subject to this requirement if the CDPH determines that the use of resources to keep the ED open substantially threatens the stability of the hospital. CDPH confirms that the basis for the immediate closure of LAD is based on its financial insolvency.

In addition, the hospital must take reasonable efforts to ensure that the community it serves is informed of the planned closure by advertising, soliciting media coverage and advising patients and third party payers. California H&S Code Section 1255.1 requires at least one public hearing; however, given the late notice, it was not possible to conduct the public hearing prior to the actual closure of the facility.

The EMS Agency has contacted the hospitals immediately surrounding LAD to determine the impact of the closure on their EDs. California Hospital Medical Center, Good Samaritan Hospital, and

Olympia Medical Center, while recognizing that any loss of capacity in the system is problematic, do not report an increased patient load directly attributable to the LAD ED closure. Hollywood Presbyterian Medical Center anticipates an impact from the overall closure of the hospital particularly with psychiatric patients. These hospitals agree that it is still too soon after the closure to obtain definitive numbers to determine the net impact.

The EMS Agency also contacted the Los Angeles City Fire Department (LAFD) who is the primary 9-1-1 jurisdictional EMS provider for the communities surrounding LAD. LAFD reported that the closure of LAD ED will negatively impact their operations and patient care by increasing the length of time to transport patients to alternate emergency departments as well as the length of time that EMS personnel are held at busy emergency departments, waiting for available staff to transfer care.

By regulation, hospitals are required to provide to the EMS Agency a 90 day advance notice prior to downgrading or closure of the ED. In addition to providing timely notice to stakeholders and the public so alternate arrangements for care can be made, the advance notice period is designed to allow sufficient time for the IER to be prepared and a public hearing to be held with the hearing information to be incorporated into the IER. Section 1300 of the California H&S Code provides that this information be submitted for consideration by the State regulatory authorities in approving the closure of the ED. Because of the sudden closure of LAD ED, a comprehensive IER including results of the public hearing serve no purpose. Nevertheless, an IER has been prepared by the EMS Agency to assist in planning purposes.

CONTRACTING PROCESS

Not applicable.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

The closure of LAD ED will have a negative impact on the community and the Los Angeles County EMS system.

The Honorable Board of Supervisors

5/14/2013

Page 4

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Mitchell Katz". The signature is written in a cursive, flowing style.

Mitchell H. Katz, M.D.

Director

MHK:rt

Enclosures

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Director, Emergency Medical Services
Emergency Medical Services Commission

IMPACT EVALUATION REPORT

On the Closure of L.A. Metropolitan Medical Center Emergency Department

I. PURPOSE OF IMPACT EVALUATION

On March 20, 2013, L.A. Metropolitan Medical Center (LAD), located at 2231 S. Western Avenue, Los Angeles, notified the California Department of Public Health, Health Facilities Inspection Division and the Los Angeles County Emergency Medical Services (EMS) Agency of their intent to transition the emergency department (ED) to an urgent care center within 90 days. On April 1, 2013, LAD notified the EMS Agency that it will be closing its ED effective April 2, 2013. The purpose of this report is to assess the impact of the closure of LAD ED upon the community, including the impact on access to emergency care, the impact on services provided by surrounding hospitals, and the impact on services provided by public and private EMS provider agencies.

Following adoption by the Los Angeles County Board of Supervisors, the Impact Evaluation Report (IER) will be submitted to the California Department of Public Health, in accordance with provisions of the Health and Safety Code (H&SC) Section 1300.

II. SCOPE OF IMPACT EVALUATION

The required scope of the IER is set forth in H&SC 1300. The impact evaluation will consider:

1. Impact of the LAD ED closure on surrounding hospitals, including specialty and disaster services.
2. Impact of the LAD ED closure on prehospital EMS provider agencies, including public and private providers.
3. The impact of LAD's closure on the surrounding community.

III. SUMMARY OF FINDINGS

1. There are a total of twenty-four (24) acute care facilities within ten miles of LAD. Of these twenty-four facilities, seven are within five miles.
2. LAD ED treated 7,728 patients in 2010, or approximately 21 patients per day.
3. LAD ED received 1,075 patients transported by the 9-1-1 system in 2012, or approximately 3 patients per day.
4. From an EMS perspective, the closure of LAD will impact the residents of Central Los Angeles specifically the Mid City and Downtown areas. The Los Angeles Fire Department (LAFD) is the 9-1-1 jurisdictional provider agency and expressed concern regarding longer transport times to alternate facilities and increased delay of prehospital personnel as they wait for transfer of patient care to hospital staff. These impacts will include:

- a. Longer travel times to reach emergency services. LAD currently receives 0.4% of the total number of patients transported by public and private provider agencies within the 10 mile radius. LAFD transports 100% of LAD's 9-1-1 volume.
 - b. Possible delays in obtaining prehospital emergency services as a result of longer out-of-service times for prehospital EMS personnel engaged in patient transports to more distant hospitals.
 - c. Loss of geographic availability of basic emergency department services for residents of Mid City and Downtown areas.
 - d. Loss of a community resource for disaster purposes.
 - e. Loss of 8 critical care beds.
 - f. Increased requests from remaining hospitals to divert 9-1-1 ambulances due to an inability to move greater numbers of patients through their emergency departments.
 - g. Possible increased utilization of 9-1-1 by citizens who currently walk or drive to LAD.
5. The combined total number of emergency treatment stations in the 10 mile radius is 663 beds (does not include urgent care beds). The closure of LAD would reduce the number to 659 treatment stations.
6. Hospital emergency visits to facilities within the 10 mile radius were 1,037,950 patients for 2011. This equals 1,565 patients per treatment station. The closure of LAD would result in a ratio of 1,575 patients per treatment station (assuming patients currently seen at LAD would seek emergency care at one of the hospitals within the 10 mile radius).
7. Data on emergency treatment stations is contingent upon all hospitals within the 10 mile radius continuing to operate emergency services.
8. Patients with non-life-threatening illness or injury will most likely experience longer waiting times in the emergency departments of surrounding hospitals due to the closure of LAD.
9. LAD is not an Emergency Department Approved for Pediatrics (EDAP) so prehospital care providers were directed to other facilities if their patient was age 14 or younger. The only children evaluated and cared for in the LAD ED would have been walk-ins. There will be no impact to children in terms of 9-1-1 transports.
10. LAD is not a designated trauma center. There will be no impact on patients that meet trauma center criteria or guidelines.

11. LAD is not a ST Elevation Myocardial Infarction (STEMI) Receiving Center. There will be no impact to 9-1-1 patients experiencing a STEMI.
12. LAD is not an Approved Stroke Center. There will be no impact to 9-1-1 patients experiencing a stroke.
13. LAD, as one of the hospitals under the California Hospital Medical Center Disaster Resource Center umbrella, had decontamination capabilities and personal protective equipment.
14. LAD had a total of 213 licensed beds, of which, 16 were obstetrical and 98 inpatient psychiatric. There will be a significant impact to the surrounding community and hospitals for patients requiring obstetrical and psychiatric care.

IV. CONCLUSION

Based on the above findings, the Los Angeles County EMS Agency concludes that the closure of the emergency department and acute care beds at LAD will have a negative impact on access to, and delivery of, emergency medical services in Mid City and the surrounding communities.